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APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 09/223,016 12/30/1998 SCOTT L. MINNEMAN 100126 2341 7590 08/05/2003 OLIFF & BERRIDGE **EXAMINER** PO BOX 19928 CHIEU, PO LIN ALEXANDRIA, VA 22320 ART UNIT PAPER NUMBER 2615

Please find below and/or attached an Office communication concerning this application or proceeding.

DATE MAILED: 08/05/2003

PTO-90C (Rev. 07-01)

Application No. Applicant(s) 09/223.016 MINNEMAN ET AL. Interview Summary Examiner Art Unit Polin Chieu 2615 All participants (applicant, applicant's representative, PTO personnel): (1) Polin Chieu. (2) Mark Woodall. Date of Interview: 04 August 2003. Type: a) ☐ Telephonic b) ☐ Video Conference c) Personal [copy given to: 1) applicant 2) applicant's representative Exhibit shown or demonstration conducted: d) Yes e)⊠ No. If Yes, brief description: Claim(s) discussed: _____ Identification of prior art discussed: Agreement with respect to the claims f) was reached. g) was not reached. h) N/A.

Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: <u>The faxed copy of the certified amendment with a PTO stamp indicating a dated receipt of 4/4/03 has been received. The Final Rejection mailed 6/18/03 is hereby vacated. An Office Action on the merits will be forthcoming.</u>

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN ONE MONTH FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.

Examiner's signature, if required